

● PRINTER RUSH ●

(PTO ASSISTANCE)

I FW

Application : <u>09/435540</u>	Examiner : <u>Parton, K</u>	GAU : <u>2153</u>
From: <u>S. G. C.</u>	Location: <u>IDC</u> FMF FDC	Date: <u>2-9-05</u>
Tracking #: <u>06058327</u>		Week Date: <u>12-27-04</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>05-27-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Original Claim 35 depend on original claim 32, which is cancelled. Please Resolve.

Thank You
[Signature]

[XRUSH] RESPONSE: _____

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04